Speaker 1 ([00:15](https://www.rev.com/transcript-editor/shared/1a_uzoBboqNblU6FNRraeVEmOHxtUHjQbPg-KjKZlpGqGOBqqGAhllnlN8Jdzyz0lfwNlB0S-sO8Gtz3Iaz2U5xKClg?loadFrom=DocumentDeeplink&ts=15.26)):

A diagnosis of breast cancer can cause a life-changing ripple effect of impact affecting those we love the most, and those upon whom we lean for comfort and strength in the most challenging of times. My name is Ashton Hurley and I'm the CEO of Breast Cancer Ireland. And you're listening to More Than A Lump, a podcast that talks openly and honestly to a selection of guests about their very personal connections to breast cancer, be it through their career choice, their own firsthand experience of the disease, or through sharing the experience of close family members. My conversations will center on how breast cancer has informed their perspective on life to love family health, their goals and aspirations. Although each story is utterly unique, the one common thread that runs to each one is that breast cancer is more than a lump.

Speaker 1 ([00:57](https://www.rev.com/transcript-editor/shared/rW0lU_27j5huSvrjEHbn7C5tnTOKx_Ppg34LPYfK-HS1I_uHmudku5iKwXeWeODANXMf5uVlIDD89o-oPPgcIAu1PpE?loadFrom=DocumentDeeplink&ts=57.3)):

Rachel McKenna is 40 years old and is living with cancer. Rachel experienced severe pelvic pain seven weeks into her pregnancy, which she put down to her condition, and she expected the pain and discomfort would pass when her baby was born. Things kept getting worse and Rachel also began to develop extreme back pain. The birth of her beautiful son, Elijah, who's now two, brought Rachel and her fiancee Aiden, great joy. But sadly, her diagnosis of Stage four breast and bone cancer when Elijah will less than a year old, has been traumatic mentally, emotionally, and physically. In today's podcast, Rachel takes us through her story from those early signs during her pregnancy through to the day she was told her cancer was inoperable. Rachel is now an ambassador for Breast Cancer Ireland, and is supporting our Metastatic Matters campaign, which will run throughout 2023 in an effort to demystify the facts.

Speaker 1 ([01:44](https://www.rev.com/transcript-editor/shared/eiuSsfOvG2ySfm3ltsbYDe5fFWB0vnH8BhTxr1XR-RalmLrgto7Ky6oTYAib_bqEAFM-x_b5MV9lyVTgZHvPIA1kHJM?loadFrom=DocumentDeeplink&ts=104.78)):

Rachel, you're very welcome to More Than a Lump podcast. Thank you for having me. Thanks for coming in today. And indeed, you've been helping us all during the past year, especially with great Pink Run weather. It was at the event with all your gang of supporters <laugh> back in October, and also the photo call in July immediately was fantastic to have you there. Oh, it was an absolutely amazing experience. And, um, my sisters and brother and cousins, everyone who'd turned up just really mentioned about the atmosphere that was there. It was such a joyous, happy, celebratory atmosphere, and it was such an amazing day. And of course, my little fellow definitely made himself known and the amount of photographs and, uh, he did manage to corner the giant rabbit and I think it was Seal as well, and have a conversation. It was just amazing. It was absolutely amazing.

Speaker 1 ([02:35](https://www.rev.com/transcript-editor/shared/onfe706L-Z_LnOctI5C2hmoSVeD-wa84vtTpoXhe9eYudvGz70ggtSYKCQktQpig4FBGQkhovXn6jyX7Ki4XW8KNDao?loadFrom=DocumentDeeplink&ts=155.55)):

Experience was a doubt. And you've become a TV star <laugh>. Yeah. The TV ad that you, that you and your and your family were involved in in October was very poignant. And you know, that's really what we're all about. It's about that message, getting the message out there, how important it is to be breast aware. Absolutely. And I think we need to kind of get it out in public that this is not, not an older lady's illness, this is an illness that can affect anybody, any woman or man at any age. And I think that ad really kind of, uh, hit a nerve with people because, uh, you know, Elijah was only a couple of just over a year at that stage. Yeah. Like Aiden's Young, I'm quite young, you know, we were just kind of at the beginning of that really happy time in our life about settling down with our son and then just bam, everything is just, and I wanna tell our listeners just what life was like pre-pregnancy.

Speaker 1 ([03:33](https://www.rev.com/transcript-editor/shared/nlrLzdHrjSQg1jzQ6olf_cPEUAbiRICiXY9gTJM7B8kuM0ns2TS5tCwKIQvY-32nZXF0ei12jfhhglRZt17YYNzd0ow?loadFrom=DocumentDeeplink&ts=213.41)):

Oh, <laugh>, um, pre-pregnancy. Yeah. It was, um, well I was working as a teacher still. I absolutely loved it. Um, I was only back about three years. I'd been working in the Middle East then as well. Um, so it was all such an amazing experience and I was settling back into Ireland and, um, I had met Aiden actually when I just returned from the Middle East. Um, and, uh, we started dating and it was just, it was great. And we were getting on like a house on fire and we were doing whatever young couple does. We were going on holidays, on weekends away, and, you know, nights out and days out. And, um, yeah, it was, you were doing everything that, you know, that young people were doing. I was in the gym, I was working out all of these kind of things. So it was, you know, it was a really happy time.

Speaker 1 ([04:26](https://www.rev.com/transcript-editor/shared/L9ZTz9EAdzz96Bfag3fLxRamHx6cjCL69uo_LY3lFnllR0ta2Ljzu7mPzW3eHFYaROdJO2rffbMNtW3K03JKyRn5atQ?loadFrom=DocumentDeeplink&ts=266.6)):

It was. And then you found out you were pregnant then? I found out I was pregnant. It was a big joke because, um, it was in about February, March, 2020, so it was around the time that, um, obviously Covid was just becoming well known. So everybody was joking about how we definitely didn't keep our social distance and things like that, <laugh> and, uh, uh, I, we had to explain, no, it was before that. So, um, yeah, I find out when I was just, um, five weeks, two days actually. And it was the best surprise ever. Um, it was amazing. It was a complicated pregnancy. Okay. Um, at 17 weeks I had to have emergency surgery to have my appendix removed, so that was quite a difficult time because Covid was very prevalent at that time. So, um, I had to hear on my own that there was a strong chance that I could lose my baby here and then, you know, I had to try and tell that to Aidan over the phone.

Speaker 1 ([05:28](https://www.rev.com/transcript-editor/shared/_gVVs9vszUXVEJ6TAPRa5dWIgaZgxLOfY8uw90_5R6zL4lI4kp6eTWprisNq7UcKn1xLI9vlTDvko27vTWmaH2efhyo?loadFrom=DocumentDeeplink&ts=328.64)):

So that was quite difficult as well. And um, then I went on, I obviously had my pelvic girdle pain from seven weeks, and then I had Covid and I was hospitalized with Covid and then I had gestational diabetes as well. And um, I should have threw everything into the mix. It was an interesting one. Yeah. But, you know, it's amazing that through all of that, I have this absolutely perfect, you know, little boy. So he's just totally meant to be and just so strong. And he's been sick once in two years, which I just think is amazing. Um, so to have all of that, and obviously I think my cancer began during my pregnancy as well, so all of that was happening in my body. And to have such a perfect little man after it, you know, fantastic. It's ah, such a blessing, blessing. Rachel, you were breast aware, like you checked yourself regularly.

Speaker 1 ([06:20](https://www.rev.com/transcript-editor/shared/FGJUAs2gd2nckFSCyRPkp32dkuNE9iFUoQghunP5gtQk9G1P3c5InIQ6giToAi8XglxGuhUjUftFwjJc5g4FBDiYWeg?loadFrom=DocumentDeeplink&ts=380.76)):

Absolutely. I was very much breast aware to the point of where I had actually thought I had found a lump, uh, around, it was November, December, um, 2021 it would've been. And I went to my doctor about it and I was sent for a breast check and I went from my mammogram and it came back all clear. Um, and, uh, we actually had kind of had a joke about it because the doctor had explained that, uh, my breasts were quite nodular and that's maybe why I felt that I had a lump. So that became the ongoing joke for me and Aiden now the, the nodular boobs. And uh, cuz we'd never heard that term before, ever. But yeah, I was, I did my breast checks, I kept, you know, uh, a luck out for any kind of, uh, changes or anything like that. And there was no, you know, indicator that I should be more aware than anybody else.

Speaker 1 ([07:15](https://www.rev.com/transcript-editor/shared/JySFPdRFHHryz_fDi2a5-idq3DqRmRKyobsgPAuRMPr016GgbertnfZFojP-Ucvz7XcENcOYBJVfry57aTG5EThshsc?loadFrom=DocumentDeeplink&ts=435.08)):

It didn't run in the family, it wasn't anything like that. It was just something that, uh, I suppose I was aware of and I did regularly and as soon as I found any changes, I, I was there to check it out. So it's, and then you had Elijah? I had Elijah, yeah. And then, and then, and then, um, so as I said, the pregnancy was quite difficult. I had, uh, pelvic adal pain from week seven, which is quite unusual because it doesn't normally, uh, begin, but, uh, we reckon that was, that's what it was. But everyone said, don't worry about it. As soon as you give birth, it's gone. So I went through my three days of labor, whatever. I know they don't count those hours before. Yeah, I'm telling you, I count them <laugh> and I think any other woman who's had a child probably counts them as well.

Speaker 1 ([08:05](https://www.rev.com/transcript-editor/shared/5rGgxr0EEGnhim0cyj_D8d_8nuvfaEFRqBd6mNCc2Y0Rb5FJc36lY14bwRurg6Gprb-d-TPle0Rk1fpyMWE0tOA6GUY?loadFrom=DocumentDeeplink&ts=485.32)):

Um, so, um, after I'd given birth, my pelvic girdle pain actually got worse. It didn't get better. And, um, I was feeling very, very tired, very fatigued, which obviously, you know, people would say you've just had a new baby. Yeah. So it was no surprise, but I had mentioned it to my midwife at my, uh, I think it was six week check, cuz I thought, well, perhaps it was chance there was long covid as well. Yeah. Um, so we got some blood tests done, blood tests came back normal. Um, but as time progressed, I just kept getting worse and worse. Uh, pain was developing in my back. I had aches and pains all over. I was exhausted. Um, I had mentioned it, um, to my doctor, I think it was at the 12 week check. And, um, she had had suggested that it was, um, pregnancy related.

Speaker 1 ([08:59](https://www.rev.com/transcript-editor/shared/VzZQFlG1-StdZireB65vChfhWrIxBuWhm6V6YTxm2CDHaAHECkhLr1nVTI-BX6nkulrJc2fKdOD10aZfg9nvP3HMJms?loadFrom=DocumentDeeplink&ts=539.16)):

Uh, and uh, she had said, you know, I remember when, uh, I was pregnant, all those aches and pains, and so that's what, you know, I, I believed it was, and that was grand. And, um, uh, we went on then for another couple of weeks, and we actually, it was May in 2020 and, um, no, it must have been 2021 actually. Um, we went to the zoo and we were going for a lovely day out. And, um, Elijah was quite young at that age, uh, at that stage, he was probably about six months at that stage. So we, I always had the, the pram because I had to lean on that. Uh, it was to the point of where I remember saying it to Aidan, I said, Aidan, I feel like my spine can't hold me up. It doesn't have enough strength to support me.

Speaker 1 ([09:50](https://www.rev.com/transcript-editor/shared/h_wOld-wJYDurxwLbf-HnoCFKZPkTL0jCw_MWWB5hiLYKtZf2jILndxjqHdTNqixJlUZLdN3h41lKcG35V1WfdBIZ3g?loadFrom=DocumentDeeplink&ts=590.44)):

Um, and the day we walked around the zoo for a couple of hours, I got into the car, I drove home, I went to get outta the car, and I couldn't get outta the car. Um, that was it. I was just in absolute agony. I tried to put my legs out and stand up and it was that feeling of, no, my back actually just can't, I can't support. So I then crawled on all fours into the kitchen, uh, or into the sitting room, and I literally howled and rised with pain on the floor. So it was myself, Aidan, and just Elijah as a baby. So we called the doctor and Aidan called his mum. So, um, she could take Elijah and Aidan could help kind of deal with me. And I'll never forget, the doctor came out and he sat on the corner of the sofa and I was explaining to him how much pain I was in, which I thought would've been completely obvious considering I was lying on the floor screaming.

Speaker 1 ([10:50](https://www.rev.com/transcript-editor/shared/wYDJZt6skrBx88fHL-y5sHUUHYtdBkvLNOmuLkZqwzpSMq_eUJpydsANF0bGNWchDcasl_AR8JUHC7lygl6ReToXvDU?loadFrom=DocumentDeeplink&ts=650.1)):

And he wrote a prescription and left. And that was it. That was it. You should probably get an mri. He said and left. He didn't, and when I think back, I, I probably should have gone to emergency or I should have called an ambulance or, so I got painkillers and, um, I started to take the painkillers and, uh, they helped a bit with the pain, but you know, I just had a baby. Um, so I remember I crawled up the stairs on all four, um, and I fell asleep then. And the next morning I got up, tried to put weight on it and had to lean against something all of the time. So this kind of became the, my reality, I suppose, over the next couple of weeks. And, um, the prescription the doctor had given me had run out. So I rang my own doctor and I explained to her the whole situation and, um, she renewed my prescription.

Speaker 1 ([11:50](https://www.rev.com/transcript-editor/shared/OlHSEfCmECH3lP_BDivngz_OiN36IruvV6IZyokpX7ZeAznNCmakgi31v-NpdY8HqrH2TslaSn6oem0iiGFYFA9NJcA?loadFrom=DocumentDeeplink&ts=710.21)):

So I'd also had liver problems whenever I was much younger. So there were certain medications that I wasn't actually supposed to be on because they called my, caused my liver to fail. So some of these, um, medications, the doctor on call had prescribed, uh, because basically there was nothing else that would've taken away the pain. So I took them and after a couple of weeks I began to get a pain in my side and I thought, oh God, this is a whole liver situation starting again now. Um, and I think at this point, um, I had gone into my doctor and she had done blood tests and one of the blood tests came back where the liver function one was normal and one was slightly irregular. Okay. And I think it was around this time, so that was around May. And then in June, I actually found a lump on my breast.

Speaker 1 ([12:47](https://www.rev.com/transcript-editor/shared/BOg7-eNSxYdOaJi-qca-xkVKN5ppu-WUaoGMBhkdC-ufakK2jdmbgvMbIwN7r-dkdRDQz2L64oGHAT4pJyR-mp3gltI?loadFrom=DocumentDeeplink&ts=767.51)):

And I went into the doctor and I explained to her, oh, I found a lump on my breast. I remember I had a whole list of things. I've still got the aches and pains, my back's still in bits, blah, blah, blah, blah. And, uh, she says, okay, we'll refer you for, um, a breast check, which was grand. So she referred that on and she mentioned the MRI again then as well. And, um, I think it was the second we did the blood tests again then, uh, for the liver. And she also had recommended a physical therapist to me as well. Um, and I did go to see that physical therapist and he gave me crutches. And I remember that was, so he did some work on me, he said, he said again, like, you know, that when I walked away, I walked in, he was like, you're in quite a bad way.

Speaker 1 ([13:34](https://www.rev.com/transcript-editor/shared/xZj-QSkctrknPrP0tUVuBP5PbMWaO3e_FLn6--wHEidv-CJ03rUXTMdn9UtsE-Nwmng559qqzWGnF13dQvxGJ1MfHak?loadFrom=DocumentDeeplink&ts=814.97)):

Um, and again, he had suggested the mri, so I had booked an MRI then as well after my doctor had given me a note for the mri because I couldn't raise my arm above my shoulder. Um, and previously because, um, my back was in pain, my doctor had recommended that I get an MRI as well. So I had gone f um, organized the MRI as getting the blood test done for the pain inside. And the second week, um, the bloods came back the same that it was, um, one regular and one slightly irregular. So around that time, I suppose we're up to July, August now at this point. Um, so my, uh, breast check, uh, appointment had gone through. Uh, we were waiting on that, um, the bloods were happening and I was signed up for the mri. So August Bank holiday, I'll never forget, it was August Bank holiday.

Speaker 1 ([14:40](https://www.rev.com/transcript-editor/shared/eMnY9GK73p2EwBcvBl-OLIFcSU1l22hrA_sdhhToj161JZ68RhqKQgak87-mcE-aceHVlYkGvORiD4-3jDQ5-YZLRIM?loadFrom=DocumentDeeplink&ts=880.57)):

I went for the mri and um, I'd been for an MRI before and I knew something was seen because when I was leaving, the gentleman was like, okay, thanks very much for that. Um, uh, sure your doctor might give you a ring. And it was something that no one had ever see said before. Normally they're just like, oh, right. See you now, you know, you get your results or whatever. I remember being a huge amount of pain getting the MRI done because I couldn't lie straight or flat on my back. Um, that was the Monday. And then on Wednesday my doctor phoned me, um, and my doctor, uh, was far away from where I had, uh, was living in LU at the time. So, um, she understood that and I wasn't driving at the time, so she understood that, um, I couldn't get out there, but she asked if someone was there.

Speaker 1 ([15:38](https://www.rev.com/transcript-editor/shared/SrwFuOt--REPKFtrzqUsgiKMA_cWO9VmN0vk23U0ibYFUCMf_LyVU1Tjxn4UA3Gq37nlS4uITs5SOXFgW07qDo_BJ8o?loadFrom=DocumentDeeplink&ts=938.88)):

And my best friend happened to be there at the time, and she says, we got the results of your mri. And, um, I could hear that she was quite upset on the phone. And, uh, she said, there's, there's mets all over your spine and sure, I had no experience with cancer. I had no experience. Mets to me met, meant absolutely nothing at the time. I didn't know. And I said, oh, okay, so what does that mean? And uh, she said, Rachel, it's cancer. So she said, the lump on your breast, uh, is probably a lot more significant than a cyst or something at the time. And I remember the first thing that I said was, well, at least I know, well now why I've been in so much pain for so long. Yeah. Gave you an answer. Yeah. And whilst I was told that it was cancer at the same time, there was almost a sense of relief because I felt it wasn't in my head, it wasn't all pregnancy related.

Speaker 1 ([16:35](https://www.rev.com/transcript-editor/shared/6j0pEmcxRtjKc2h1XSlrz_7Ola4TQQXFSJcZwHLRZybcqBpMz8z5CiLh6VoanHC1bSTGF0Q31N4a2F1NHLXOIB5asBg?loadFrom=DocumentDeeplink&ts=995.71)):

I knew in my gut there was something very, very wrong mm-hmm. <affirmative>. And I didn't listen to my gut instinct enough. I didn't push that intuition enough, um, or investigated enough when I look back. Retrospect is a great thing. Mm-hmm. <affirmative>, but you know, you go to your practitioners or whoever and you know, your faith is in them. Um, but at the end of the day, we do know our bodies better than anybody else. And I was really, there was a sense of relief because I was like, I knew, I knew something was wrong. I knew it was more than just pregnancy. I didn't know what it was, but I knew. And I suppose that was kind of, um, the start of the whole journey. Um, my friend, um, Sarah, she was amazing. Uh, she rang, uh, Edan and told him to come home from work and we didn't tell him what was wrong because he was working down the country at the time and we didn't want to worry him.

Speaker 1 ([17:42](https://www.rev.com/transcript-editor/shared/pJbfnwdId_ZYQD52-k535AzZmYwrzU7AuDiKpRUVxqgFA7-04aOYaXNjMtE58j0utHeMEnwrq9eenC_iYr5InAbrEcQ?loadFrom=DocumentDeeplink&ts=1062.42)):

And, um, about an hour later he managed to get back up and I come in and I had to tell him, I was like, I'm so sorry, but I've got cancer. And that's what I felt. I felt I needed to apologize for it because I felt, so, it's hard to explain, but I just was thinking, oh, I don't want to have to put this hassle or this worry on anyone, or particularly on somebody who I love, like my friends and family. I don't want to have to put them in a position where they're upset and they're worrying. Um, and I was just like, yeah, I'm so sorry I've got cancer. And But you really didn't know the full extent at that time? We had absolutely no idea. Um, it was a following day. I was admitted to, um, a hospital. They started doing tests, which was excruciating cuz I couldn't lie.

Speaker 1 ([18:41](https://www.rev.com/transcript-editor/shared/4ha-7z38TwHwjVEoeOXTfi7PI0CkTgJH5Hd43V7tSYDOVPRCrB53W6hH3jE_ZZjp3_Y0gyr33KvXQBfqMn3f4W5iMgU?loadFrom=DocumentDeeplink&ts=1121.68)):

So it was MRI and CT scans and, um, then there were biopsies and everything done. The next two days was just an absolute whirlwind, if I'm honest. Um, and I remember then they came and I can't even remember who it was, I think it was my consultant, and he said, it's breast cancer. And I remember thinking to myself, oh, that's okay. That right. You know, it's cancer, but it's breast cancer. There's loads of innovations. And I was just thinking, you know what, cut it off. The bad boys have had their run, you know, get rid of it. We'll reconstruct we'll do whatever, it'll be fine. And then, um, I remember ringing Hayden, he was like, it's breast cancer. And he was like, okay, oh right, that's grand. We can deal with that. And then, um, it was like, okay, so we're gonna operate what story?

Speaker 1 ([19:32](https://www.rev.com/transcript-editor/shared/33wL3VYLmYSs5Se2DRT-JLWdxMRSZ7plk3LiFI9ZLuovYNhnwYq_mg1k4FPHyN4tYGHUkI2fe7nF67FtQmW7cQYAcS0?loadFrom=DocumentDeeplink&ts=1172.04)):

And then it was like, no, because, um, it's actually traveled to your bones. And, um, so it's kind of, they don't give you, well I certainly didn't get the exact prognosis or diagnosis at that time. I just got told, I suppose because there's so many, they're waiting on so many test results and mm-hmm. <affirmative>, I think we had spoken about it before, it's like a jigsaw, like you're waiting for all of the pieces to come together until you can see that clear picture. Um, so yeah, they, they didn't operate or anything like that. And uh, they, I remember the consultant came and told me, and then there's an oncology nurse who sat down and I remember she was saying, she had said like, yeah, uh, the cancers had a, it's had, um, uh, good run for its money, uh, in the body at that time. And it was kind of then when I realized, okay, this isn't, this isn't something simple.

Speaker 1 ([20:32](https://www.rev.com/transcript-editor/shared/52epL2sFyxDL5M3ZcJK1-YL49LoHTn7s2TORBvn3zhFPLkBC7FItnoDy65vjM9kIJT6IZd0A8EkxIrsjfdUspaf3De8?loadFrom=DocumentDeeplink&ts=1232.11)):

This isn't just, uh, you know, cancer, let's rip it out, get on with life. This is something that's a lot more. Um, and then I suppose over time, um, you go, you meet your consultant and I remember asking him, I said, what's the exact diagnosis? And he said, it is stage four metastatic breast and bone cancer. And he says, I need to make you aware that this is very, very serious and it's very aggressive. And I went, okay. And I think it was that moment that myself and Hayden really realized this, this is actually, this is massive. It's, it's terminal and this is going to have a significant impact upon how long I live and my quality of life and everything. And I think it was at that moment, the two of us were just kind of numb at that point. And, um, and even though, like, you know, when I was taken into hospital, they told me, um, you know, you, you've got five vertebrae factor fractures.

Speaker 1 ([21:40](https://www.rev.com/transcript-editor/shared/8dU4aKpSP9SMLpm3mPMCKBLz3YH74qrmA8Do3iHTQBtVG0EB_hS7Nctokq1YdeDlBsy8_ygT7p2o4mooXIID5HESw0o?loadFrom=DocumentDeeplink&ts=1300.87)):

Like my back was broken in five places and I was still lifting up a Elijah hand, moving around and hobbling around and stuff like this. And, you know, I'd been through all of the, um, the tests and everything and I'd been in hospital and I'd been out. So that was another thing, a lovely complication of necrosis in one of my legs as well. So that, um, that, uh, staged off the, uh, the IV chemo that I was supposed to start. So I didn't even get to start chemo until, I think it was March last year. Yeah. So I was diagnosed in August, and then because I got the necrosis in the leg, they obviously couldn't do the IV chemo because that drip centimeter hole in your leg, so it wouldn't have healed up. So I was put on oral chemo and tamoxifen, and then that worked grand up until Christmas.

Speaker 1 ([22:32](https://www.rev.com/transcript-editor/shared/U6CW0dGR_vPJNCNHStcB82U76OrPN0OLAU_FE2T-a3bbP035L_6moZf7B86sBeOfPLchipOL5lZ2cmq-ustY5EKZ4XA?loadFrom=DocumentDeeplink&ts=1352.93)):

And then we, um, my consultant had said, no, it's not working great. So we'll start you in IV chemo after Christmas. And it was like, great getting this bad boy done. And then sure, I went in at Christmas with the temperature, I wasn't feeling great and ended up having to have surgery in both my thighs. So what had happened was the, um, I just mentioned, oh, my thighs, my hips had kind of been hurting me over Christmas when Ruth was trying to go for walks and stuff like that. And they did an x-ray and the, um, tumors had, um, basically broken away the tops of the fers and the pelvis. So we had to have surgery to have a, a lovely 43 centimeter rod put in each of my legs. Um, so I had the first one done on the Friday and uh, the following Friday had the second one done.

Speaker 1 ([23:25](https://www.rev.com/transcript-editor/shared/s2DVWVLKqnWHJf9GkZk4D9GwCeSFH3g1D8s7VEDNCJAw912HUTE9t-l7sj_c2t7Omm6d_BoJ1UJWjIr51WktM6JAhzM?loadFrom=DocumentDeeplink&ts=1405.48)):

So, um, that, and that was to support your body? Yeah. That was basically to make sure that, you know, the famers didn't collapse and, um, break and that I could walk basically. And, um, of all the stay in hospital. So I'd been in for the month of August aside for three days back in for the month of September. Then January 6th I was admitted and I got out the first week in February. That was the worst, the worst stay of all. Um, I had been so positive up until that and people were commenting on it and the nurses were like, Jesus, fair play. And I was like, but you know, it's grand. You know, it's, and from day one I remember saying to Aidan, I was like, Aidan, I really feel that I'm a firm believer. Things happen for a reason. And even though you may not know at the time, there's a reason somewhere, and even though it's terminal cancer and it's horrific and it's life changing, I did feel that I got it for a purpose.

Speaker 1 ([24:28](https://www.rev.com/transcript-editor/shared/s0QbX_A-Rrmthnb5TVDz01WZT8-hJdLqwdkd6s4BAxvXOxvc1bhNW650SXGsg5RfmqDAiG-v3OFV65q3r1viZoQTpHQ?loadFrom=DocumentDeeplink&ts=1468.02)):

And I felt that I, if I go through this experience, then I'll be able to help other people who go through that experience because I don't really think, you know, you need to be, go through all of that in order to fully understand what somebody else is going through. Uh, so I've been really positive up until that, but January lockdown, so I was in for about six weeks, saw eight and four times, saw Elijah three times. Very difficult. It was very, very difficult. It was, it was absolutely horrific. And at that point I couldn't really walk either because I had had the two operations and, you know, I was swollen to bits. I didn't even fit in a normal wheelchair. They had to get me a special wheelchair. I was so swollen. And I know after the second operation, I got an infection. I was very, very ill.

Speaker 1 ([25:23](https://www.rev.com/transcript-editor/shared/-bttJH-Bn65vckjkyI79C1iYnhBzy8cehdpO8tZMlHckYtiIb9Uah9yIQ_DScga6BXL_lzooO19upPT51-JceD6Nur8?loadFrom=DocumentDeeplink&ts=1523.72)):

I ended up getting the, a transfusions in the week after the aberration. And um, I remember there was one day where I was just like, the nurses knew that I was, it was, I was in a bad, bad way. And, um, they called Ed and Elisha to come in and I remember Elisha, you know, crawling up my legs. But I remember being so upset because I was in so much pain and I couldn't, he just wanted a cuddle from his mommy and I wasn't allowed to lift him cuz they were afraid, you know, the, the, the back and all of that. And you know, as a new mother, I was nine months when he, or he was nine months whenever I was diagnosed. And it was the first time I was ever away from him. And, you know, it, it, it's just, I felt like such a failure as a mom.

Speaker 1 ([26:15](https://www.rev.com/transcript-editor/shared/7plr8bYneZDRynhY2Bod_MkUgWO6nn8r_A6XUS48jVgWZo5RCU8Q5L-gglW6yf2h0YY-MaydLsDlGPNkceP8Q_qOPeA?loadFrom=DocumentDeeplink&ts=1575.87)):

I felt that, um, you know, I, he didn't understand why I wasn't there. I couldn't explain to him why I wasn't there. He was upset. Uh, and I remember Aidan saying there was one night he was upset and Aidan was like, oh, I'll put on retro's pajamas. And that helped him settle. And I was just like, oh, Aiden's just amazing. Anyway, but, uh, I was just like, that's just so incredible. Um, but it was, was such a difficult time, uh, being away from him. And then you're coming out and you're in crutches and you can barely walk and, um, you know, he's trying to jump up and, you know, he, he's like, mama, you know, come sit down and you know, you want to play football and stuff with him and you can't do that. I remember it was June this year was the first time I was able to play football with them Yeah.

Speaker 1 ([27:05](https://www.rev.com/transcript-editor/shared/QWfE3Z44t1Q3F4dJayF7IEC0oWP1TBJchp6YICpHl1Q8Bw41TR8TurMNT49Et3SCBdHPnsWwIn65DjJJIfYPjVkyrc0?loadFrom=DocumentDeeplink&ts=1625.4)):

In the backyard. And it was just, I was on crutches for a whole year. And it, it was just horrific. There, there's no two ways about it. It was a really horrific, horrible stay in hospital. And the nurses are absolutely amazing. The consultant is me. It's, and all of the staff are amazing to the cleaners, to everybody. But it was an absolutely horrific time. Well, no young mother wants to be without seeing the developments of their, their, their firstborn child. Very, very difficult. Absolutely. And he actually learned to walk, uh, he took his first steps that time and I remember and sent me on the video, he says, I've record. He says, I didn't record his first steps, but I'm recording his second steps for you. And again, like, you know, I was so delighted and so excited, but I'm kind of sitting going, I should have been there for that.

Speaker 1 ([27:57](https://www.rev.com/transcript-editor/shared/b8foRj4xvDkH5qTdG-LEr7G4WnxF0LCuwwmXfympWR83OFb3Uvdbp2L_fOIy1GuK2gNP58jGB-WetIZXit7Vk9GAYac?loadFrom=DocumentDeeplink&ts=1677.68)):

I know. And my friends were like, but Rich, you could have been at work. And it happened. And I was like, I know, and you're a hundred percent right. I said, but I think it's the fact that I was in a hospital, and even though it's out of your control, it's completely out of your control. It's that mommy guilt. Yeah. And everybody knows that mommy guilt. It is the worst kind guilt ever. And even though it's not logical, mommy guilt doesn't have to be logical. You just feel it. And even my last stay in hospital, which as I was saying was a brief day was just September, like Elijah knew going up to the hospital door, he was like, mama, mama Edan was saying like, he, he knew that's her other house. That's my other house. And you know, that was one of the benefits, Elijah, uh, particularly during the first Tuesdays when Covid was okay, um, Elijah would come in and visit and he was such a positive little for, uh, force, not just for me, but for all of the nursing staff.

Speaker 1 ([28:59](https://www.rev.com/transcript-editor/shared/De1of1lTQXbSU6i--G9KYrS5UYR7aljCUZxafbu3hACBSvsVLQojo4ZpgJu0it6EKERTJSrIXJJiUDIm2Gz7Hx2ydkE?loadFrom=DocumentDeeplink&ts=1739.58)):

The girls would come down and be like, is Elijah coming in today? Is he coming in? And, you know, he was crawling and he'd go over and sure the next minute one of them would have him picked up and there'd be a way off somewhere. And he just brought such joy, such positivity to everybody in the hospital. And it was such an amazing, beautiful thing. Mm-hmm. <affirmative>. Um, so I'm always grateful for that. And sure, like, you know, if you want something to fight for it, there's nothing like, you know, your amazing fiance and, um, your nine month old baby to fight for it. Like absolutely. There's, there's nothing like it. But, you know, he, he's, he's noticed my port now. He's, that's the new thing he's become aware of. So you are left with that question. And how do you start to talk to him?

Speaker 1 ([29:48](https://www.rev.com/transcript-editor/shared/ct-2i95WDk1MQglom78_nhBquIT0G1iHt4wWIyh7SmNYB1w5qLlouhocAZDrdcSdGYTfBuT1qjmVTaYrNC280AT3IHg?loadFrom=DocumentDeeplink&ts=1788.88)):

Like, he's two now, he knows things. He's, oh, he'd buy and sell you <laugh>. Um, lots of people talk about their port and they give it a name. Oh. You know, like Rosie's idea, you know, or Teddy or whatever. Oh yeah. And it's like, you know, that's mommy's Rosie or that's mommy's whatever, you know, just to take that, I suppose that fear Yeah. Out of it. It's some kind of like a comfort thing. But that's my little warrior. That's my little whatever, you know? Oh, that's a brilliant idea actually, because I, I didn't even know. And he was just kind of poking at and i's like, that's, that's mommy's port. That's where her medicine goes. Yeah. And he was just like, yeah, okay. Tractor. Yeah. He was way off again. He was way off again. Um, but yeah, he's kind of getting to that stage where, you know, he kind of knows there's something I, the, um, I remember I had a special chair whenever I came out of hospital because I obviously I was so swollen and I had to sit in a particular way.

Speaker 1 ([30:44](https://www.rev.com/transcript-editor/shared/d1RIPYOIDe9Lq8n7xgUbb7UoWIFbVr_Vsf-gLRNauTEepBEIJfSYef5a1XVvt4Z_X9Jc_O7IYdrnwc6v5RAZaQfwLUo?loadFrom=DocumentDeeplink&ts=1844.42)):

And, uh, after a couple of months I managed to change that chair into a lovely electronic recliner. The day they came to take the chair away, he was so upset. He was like, mama's chair, mama's chair. And he cried and cried and cried. And I had to explain to him, it's like, it's okay sweetheart. We're done with that chair. We're going to get a new chair. And anytime out of the hospital he'll hop up and sit in my chair and it's, it's his and mama's chair cuz he comes up in the evenings and we have cuddles and we watch television before we go to bed. And, you know, uh, he has his dinner, he'll sit up on my knee and I'll feed him. So that's, I suppose for him, that chair represented our relationship and he just couldn't understand why it was going. And I suppose he was like, oh, it's like mama, mama goes and oh, it was just heartbreaking.

Speaker 1 ([31:36](https://www.rev.com/transcript-editor/shared/B3mUK5kRcczUpTE3rddXno93HxljMnZBM8XEMRJjI8M89iI9yYa8HMTrtYzc-yl8htBqo-V81SJ9fT6HlQ-lfAOmWdQ?loadFrom=DocumentDeeplink&ts=1896.54)):

Say, um, see, I'm so upset over the chair. But that chair represented so much more to him. Exactly. Um, but I look at you now, Rachel, I mean, when I met you in July, just gone at Leopardstown and you were on the crutches. Yeah. And by all intents and purposes looking at you, it was hard to get around. Oh yeah. And you were in pain. Yeah. Yeah. And now today you are a brightly young one coming in here, <laugh> sitting down on the chair having a chat. Yes. You mean just look at those last 6, 6, 7 months. It's amazing. It is absolutely amazing. Like in August, I remember turning to Aidan going this time last year. They didn't know whether I'd actually come outta the hospital. I didn't realize just how bad it was, thank God for all of those drugs. Um, but he had said like, we didn't know Rachel, it was that bad.

Speaker 1 ([32:32](https://www.rev.com/transcript-editor/shared/xK5ITKWzqjsbj050LMyb3FT_c4wzvlwFcVjTyVyRSoOqPVhWipL9zGXp5efzkvLKkdIqnem765Q0FBmFiFfymYWnsMY?loadFrom=DocumentDeeplink&ts=1952.34)):

And uh, I was like, look it, I'm going back to work three days a week. You know, I'm coming off the crutches. I'm getting to move now for longer distances. I still kind of, uh, need them a little bit. But outta sheer stubbornness my uh, physio, uh, in the hospice laughs at me. She's like, yeah, you're just being stubborn. I'm like, yeah, I am. But, um, she understands. She's amazing. And, um, but the jokes you're on are obviously working. Yeah. So I had finished up my chemo and then I was put on two hormonal tablets and, uh, it was around September, then I started to feel a little bit off I awful pain in my back and my shoulder. And we find out, unfortunately the cancer had spread to the shoulder mm-hmm. <affirmative>. Um, but as I said, I was like, I'm staying positive, it's spread.

Speaker 1 ([33:26](https://www.rev.com/transcript-editor/shared/aCmAx2X6XhLGy7GSVSaQPmUrK0cYNG8Y7h2wedZaZYE65O11nLNhCJcj4I4Y9sC7NDpFvi79UoNbM39-LqNgPmU7PYI?loadFrom=DocumentDeeplink&ts=2006.6)):

It's only spread a little bit and it's still in the bone. Yeah. So he put me on, my consultant has put me on a new tablet that he's hoping this one will work. Um, and, um, I believe it is because I'm feeling great. Uh, I'm up and about. I got some, um, I met with my surgeon there about two weeks ago and I'm getting injections to help with the hips and uh, I think that's one of the reasons why I was so sprightly coming in here <laugh>. Um, but it does show you though the importance of clinical trial and come Absolutely. With these new cocktails of drugs Yeah. That are helpful. Yeah. I mean, I remember over the years, you know, different trials that have come about and different drugs, you know, for whether it's bones, spine, liver, lungs, you know, they are helping 100%. Like if I even think about, you know, I had tried, I was on the tamoxifen, which is quite well known mm-hmm. <affirmative>,

Speaker 1 ([34:23](https://www.rev.com/transcript-editor/shared/2uFMsx1eRjfm8Ue7WMGPCZaJPS4Y7YeDYoSeYdV-t3fYNmCyyeQMPHZ0QqlI9wvrPtj4rqkt4j8fHCINdzGhNaPtZVA?loadFrom=DocumentDeeplink&ts=2063.32)):

And it's kind of like the miracle drug. Uh, and unfortunately, um, that didn't work for me. But thank God there were other options. You know, when you think about years and years ago, there weren't options. Um, and I've been very fortunate that, um, I'm actually, uh, getting signed up for, um, they're going to send my biopsy to, uh, a place and they're going to look at it to see if there are any other, um, indicators that would kind of say, okay, it might be, uh, a chemo or a type of drug that might be used for say, liver cancer. Sure. But it might be suitable to my cancer. Absolutely. And even the fact that they are doing that these days is just Absolutely. Yeah. It's like repurposing drugs. Absolutely. Yeah. Absolutely. It's so important. And they're, and that is all down to what we now know is personalized medicine and personalized treatment plans.

Speaker 1 ([35:19](https://www.rev.com/transcript-editor/shared/TTLblIjI-euUAiYdxlBMeNvI7DmB7GI8DTuRXLmnC12pDP6Km2Sj9n3d2D-0PsaUWjPVlOhcCjQZNp6NzPyr29b1MCs?loadFrom=DocumentDeeplink&ts=2119.62)):

10 years ago, you know, we could have had a hundred women in the room and given all of them chemotherapy Yeah. We'd only work on 10%. Yeah. So the other 90 women will go through, you know, the awful toxic side effects of chemotherapy that aren't necessary was never going to work. Yeah. So we know with, you know, because of your genetic makeup, your bloods and all of that, that you, each patient, regardless of the subtype breast cancer or cancer that they have is different Absolutely. And is unique a hundred percent and has to be treated like that. You're spot on. Everybody is unique and we all behave differently or relate differently to particular medicines. Like I remember the idea of chemo always put the fear of God on me because I didn't know how it had progressed. And I had heard stories of people being very, very ill from chemo and that can still happen.

Speaker 1 ([36:10](https://www.rev.com/transcript-editor/shared/njawou-52A0Dx-pmwsCV3EUEl4JOmb3zfssqzkmYpqjCcfGCECwzD5vA03Flfc4hAkAZ9piyMSswq_PMuLgiWA7OwC0?loadFrom=DocumentDeeplink&ts=2170.15)):

I was so fortunate. Yes, I lost my hair, but thank God I had a good shaped head. Yes. That's all I can say. And, and a good eyebrow pencil and that definitely helped. Um, but you know, it, it it's, I I, that was kind of the biggest side effect and you know, I had to deal with that because it had a lot to do with my identity and femininity and Sure. All of that. But when I look back and kind of sit and go, well, thank God I wasn't very, very ill. I I'm, I was so grateful for that I was still able to play with Elijah. Now Elijah would look and rub my head and that was it. But to him, I was still mommy. It didn't matter whether the hair was there or the eyebrows or the eyelashes, it, you know, I was still his mommy and I was just grateful.

Speaker 1 ([36:56](https://www.rev.com/transcript-editor/shared/bkwXdiwaw7uCr0Y_CrgN5q2L8IRAPy1-zwh2f90Rb1ky1UJ798EAOy478aillplXNRnWEBrPllaD32iVHFPGkRR22l8?loadFrom=DocumentDeeplink&ts=2216.27)):

I was absolutely accurate, but thank God he was having two naps a day. So at that point it was like, oh, come on, we'll go for a nap. So there was that benefit as well. But, but that fatigue as well that you talked about in the early days, coupled with the, with the pains you were having. But I've often talked to so many who talk about that extreme tiredness Oh yes. In advance of knowing what was wrong with them. Oh, absolutely. It's that just that complete lack of energy. Yeah. I actually didn't realize the difference between fatigue and tiredness until I began to experience it. Mm-hmm. <affirmative> and fatigue is even standing up to walk to the bathroom to brush your teeth is like trying to climb mine. Everest, your limbs just feel heavy and achy. You're just so exhausted and tired. You just want to lie down and have a nap.

Speaker 1 ([37:49](https://www.rev.com/transcript-editor/shared/judpSe0o_YE4CJdTERbWsbwISRBOQMtD79fk3J_xFH46DAsneEdp9CPTUpygEm9kjV5a14TXTIcA-W_FvD8GA9ca8Q0?loadFrom=DocumentDeeplink&ts=2269.69)):

It is, fatigue is probably the worst part of it because you can't fight through fatigue. It's not like tiredness where you'd be like, come on, have a coffee and keep going. Yeah. It's not like that. You, you just have to sit down and sleep and rest if you're fortunate enough to be able to do that. Um, but fatigue does definitely just put a big massive stop in the middle of everything. Uh, like even going out for dinner that you know, it, it's not an option because you're just sitting there falling asleep at the table and you can hardly say your own name. Oh, absolutely. Like, I, I literally do remember those days and saying it's in, where it was like, I, I can't explain how tired I am. I can't even think, you know, I'm trying to, to form a sentence and the words are just not coming to me.

Speaker 1 ([38:38](https://www.rev.com/transcript-editor/shared/26_oVsX3y2YRR1YWq33VfyHnpDUc_7t53PAny3DOdqZy8hMTl6DEHGN7RNn6tzlQtm8c10QDbD1aATchVM8Kvf2D3jw?loadFrom=DocumentDeeplink&ts=2318.84)):

They're just so, I'm so exhausted. My brain has actually stopped working mm-hmm. <affirmative>. Um, and that is very, very difficult. Yeah. It, and I suppose for our listeners, it's often, I often get this question and you know, metastatic disease is spoken about, not a lot, but I don't think people understand the term and you talk about you had mets on your spine, but like, that's one way of saying it. But it, it does tend to me, and here is my layman's terms, is it's when you've had a primary breast cancer mm-hmm. Which yours eventually showed up as being Yeah. And it's where I talk about this being from Limerick, you know, the dandelions that you pick, they're like the Ginny Joe's. Yeah. And you blow them and all of a sudden one of the little fibers, which is like a tumor cell, runs along and hides and it evades that initial treatment mm-hmm. <affirmative>

Speaker 1 ([39:25](https://www.rev.com/transcript-editor/shared/hRhsMNSd0FzPPvNoCeHkXZaYUuZmFpmuar96qXIs_mh6rC600ZD9vFYU2sSIlpv61sFMiolmjX2q50q9O-rLJRxGtCc?loadFrom=DocumentDeeplink&ts=2365.92)):

And then it decides it's going to come out somewhere else in one of the major organs, bones, liver, lungs. Yeah. Wherever. Um, and that's what metastasis is. Yeah. It's where the tumor cells disperse. Absolutely. Yes. High. They li sorry, they hide and lie dormant mm-hmm. <affirmative> and then they activate themselves again. And we spoke before we, we came on air and we were chatting about, um, hormone fuels Yeah. And the hormones that fuel breast cancer mm-hmm. <affirmative> and we chat about, you know, there are times in a woman's unin, indeed men's lives when you knew you do need to be aware of the times it fuels. So we all have a cycle every month. Yeah. You know, when it's recommended maybe seven days after your cycle to check your breasts properly because hormones activate certain things at high time. Same with pregnancy. Absolutely. Le mine is an estrogen for, uh, fed cancer.

Speaker 1 ([40:16](https://www.rev.com/transcript-editor/shared/3cr9HBML1kRLR42D8kfnP98-0Fkxz0L2WQZjYXWWaHG6YVV4zCIagqsfpCemwk_PHjTCsXSM9OZC9FaTv60N4Ew7tL4?loadFrom=DocumentDeeplink&ts=2416.6)):

Mm-hmm. <affirmative>. Um, and I suppose pregnancy is one of those times where, um, your hormones are kind of all over the place. Sure. Similarly with, uh, menopause, your hormones exactly. Are changing and as you said, uh, at certain points in your cycle. Um, so it really is important to actually know your breasts. And I know it's not said enough, awful lot, but to continue checking your breasts during pregnancy after pregnancy, uh, in the years of follow, during menopause, after menopause. Um, just to make sure that you know your breasts Absolutely enough that if there are any changes, I was breast aware before my pregnancy, um, and it was quite late whenever I found, um, the lump on my breast. Obviously there were other, but I hadn't been checking my breasts during pregnancy. I hadn't been checking my breasts after pregnancy because I suppose, you know, between milk ducts and hormones and everything, your breasts are changing all of the time.

Speaker 1 ([41:22](https://www.rev.com/transcript-editor/shared/WxDRUpkwcNat5_d9ufwwndBedTALthrJF_APwUz0cGwCGHTxsdR5f1d8Z_TUHN4pVxt0e8Gle0AYNUOMbW1xCAtwD2I?loadFrom=DocumentDeeplink&ts=2482.72)):

So you kind of think, well, what's the point? You know, and all of that. But there is a point, there is a point to keep on checking and if in doubt, go and get it seen about absolutely straight off the bat. And I think it's about educating and empowering women to take their own breast health seriously. Mm-hmm. <affirmative>, you know, we know that breast cancer is fueled by surges and hormones. Yeah. Therefore, you know, when you have this surge in hormone pregnancy, you know, time of the month, menopause, you do need to be aware. You need to understand, as you say intuitively, if something is just not right mm-hmm. <affirmative>, you know, go to your gp, you know, talk about it, and I suppose you've got to tease it out yourself. Yeah. I mean, you kept going back and back to your GP Yeah. In relation to your pains and that.

Speaker 1 ([42:07](https://www.rev.com/transcript-editor/shared/Ls-CLVAJdxgXiGtll0EAz1Y_JyvFo-P5MgZisiQw8RXv8exsbnqJKuQfHaOttPZLCZkSWAelMshBtBgcsDt3NAxuDlU?loadFrom=DocumentDeeplink&ts=2527.08)):

So I think it's very important that women, especially women now men do have breast cancer too. But it is women with the this estrogen fueled, uh, breast cancer that they need to be aware. Yes, absolutely. No, no. They're normal as a baseline. Yeah, absolutely. And uh, as we had said before, you know, it's not about scare migraine, but pregnancy is a time when your hormones are changing. And I was nine months postpartum whenever, um, I had, uh, my baby, my consultant reckoned, I probably had the cancer for about a year and a half. Um, so it had obviously developed, uh, during my pregnancy. And it's not about, you know, scaremongering people where people or women are afraid to get pregnant or, or anything like that. That's not it. It's just about this is a period in our life where our hormones are changing and it's also a period in our life where we then become secondary because we've had our little baby, et cetera.

Speaker 1 ([43:07](https://www.rev.com/transcript-editor/shared/TwC2B5KptwR4E8M3uoO1XE67FRGMtmqwh2pBmvrFOLsddn2eKr53k40mycbB50csLGx-XGqnt4KXkdFaX2-bWpTnd7w?loadFrom=DocumentDeeplink&ts=2587.24)):

Mm-hmm. <affirmative>, we need to make time for ourselves. Absolutely. We need to make time to continue to check. Um, as I was saying before, there's a massive, massive, um, you know, uh, outpouring of information and knowledge about, uh, breastfeeding during pregnancy as well. We need to have that same, uh, approach about, uh, checking our breasts during pregnancy and after pregnancy because it is a time, as you said, our hormones are all over the place, similarly with menopause. And at that peak in our, uh, in our cycle, we need to, you know, keep on pushing this, that we need to keep on checking. We need to know, as you said, our baseline. And that includes times in our life when our hormones are changing or at a peak, be it pregnancy, menopause, whenever it doesn't matter. We have to know our baseline and keep on checking. Mm-hmm. <affirmative>,

Speaker 1 ([44:04](https://www.rev.com/transcript-editor/shared/l2JW-2P_YKZTYkCXRq2wcHgG0qbXSCiLROMDkxF9W_TGp4z_R52cn75d9UrV1jpU04u28PiHugqFdaUQP8Il3k6rpC8?loadFrom=DocumentDeeplink&ts=2644.62)):

And I know you and I have often spoken, um, in relation to, um, mammograms and age of mammograms, and I know this is the one thing I can only ever say to people is how I interpret it, is that mammogram is the best form of imaging. It's 90% effective. However, the younger you are, the less effective for the simple reason that cancer is white. Your tissue when you're young is white because it's growing and, and alive. So white on white to detect is really, really hard. Yeah. As you get older, 50, 60, seventies, your tissue goes gray to black. Cancer is easy to detect. Yes. But that it said it's not enough. Women need to be more breast aware. They just need to know their own bodies on a monthly basis. Know your baseline, do your checking once a month properly understand how to do it properly.

Speaker 1 ([44:54](https://www.rev.com/transcript-editor/shared/IFTKLK3iHMK17yLq90GJ-bBzGUYAyuGx5XCKWEAMLkQ0-63C6Vhwh2xFe5bnsQjQAfa4KxhXJTfrB4QFGd7zqoTgMX4?loadFrom=DocumentDeeplink&ts=2694)):

Yes. Then if you notice an abnormality, go to your GP directly and straight away, you know, don't delay. That's the most important thing. Don't wait. Don't wait. Um, absolutely. And as we were saying, as women, we know, we know our body so well. We know when something is off and you know, if we feel that there is something that's off, we need to go straight off the bat. And as you were saying about the mammograms there Yeah. Like that's exactly it. And you know, they are focused on women over 50 because of that. So it would be great if there were some kind of changes for younger women. Like I think 23% of cancers are found in women between the age of 20 to 50. Is that correct? That's right. That's almost a quarter. Yeah. That is not, you know, an insignificant amount of women.

Speaker 1 ([45:48](https://www.rev.com/transcript-editor/shared/2tmzSFjrHd1tbJRb3rvLja3BZ4FmoTlAHQawLBwlTb46rMoCZoesMhUq8zra9sl3zfJaXu0OybGH-h86SCLrKZHu4m0?loadFrom=DocumentDeeplink&ts=2748.48)):

That is a huge number, that's one in four. And we need to look at a way where these women can be screened, um, as well as, you know, educated in relation to the breast checks. There needs to be a way that these women could be screened regularly in order to, um, help ensure that this number goes down. Absolutely. That's the most important thing. Yeah. Is get that number down. Number down. Absolutely. And it is through awareness and heightened education. Mm-hmm. <affirmative> and then women reacting. Yes. Taking the decision to, you know, empower themselves that, you know, my breast health is my wealth and my health, so I need to, if I've spot something that's abnormal, I need to go to my gp. I need to get myself seen an MRI or, um, um, an ultrasound. If I'm in any way nervous will detect it. Yes. Possibly better than a mammogram.

Speaker 1 ([46:40](https://www.rev.com/transcript-editor/shared/EVUv1V8iOX0wNpbHyKfbsG0DIUtoVQrQ-RxgSMktRUcu_lfz4n4W-tpYLjkDU5nuKSNKAWfW-x4_QJelrZWOs662UOM?loadFrom=DocumentDeeplink&ts=2800.76)):

Mm-hmm. <affirmative>. But you know, you, you intuitively we have to just follow our gut Yes. And get ourselves checked. Yes. And get that number down. Absolutely. And you know, the sooner the better because at 39 I had to sit in a room and hear that I had stage four terminal cancer with a nine month old baby. I want to make sure that nobody else ever has to be in that situation. Um, I didn't trust my gut enough, I suppose. Um, and I would definitely, you know, I was breast aware, but as I said, during my pregnancy and post-pregnancy, I didn't check. I didn't check until it was much later. It was, I had found a lump, but sure. At that stage, you know, it was already rampant in me. Um, but I, if people continue to check and check during those periods of where there is heightened, uh, hormone surges, you know, they won't have to hear what I heard.

Speaker 1 ([47:39](https://www.rev.com/transcript-editor/shared/mnz-34U8jP6p_OyKYyknFkWV6UjRQH82TBxfrq965jK81E_5TmQKLedVBtNCXfQK-JICVTj7mkCyvQOc0UfLe81eDtw?loadFrom=DocumentDeeplink&ts=2859.55)):

Yeah. Um, and that's kind of what it's all about. Like no one should have to hear those words when they've got a young baby. And it's about that education. It's about that awareness. Mm-hmm. <affirmative> and as you said about doing it properly as well. And I know that you have the, like breast cancer, Ireland has the app as well. Mm-hmm. <affirmative>, um, that gives a little reminder of when to do it and shows how to do it properly, which is absolutely amazing. I think all girls in secondary primary school should be introduced to this. Um, I think boys should definitely be made aware of it as well. Yeah. Uh, which is why we did the great pink run, um, at school and we're an all boys school and it was amazing. Um, you know, it is about creating that awareness and education. Education is key. It is, it's absolutely key.

Speaker 1 ([48:29](https://www.rev.com/transcript-editor/shared/cGpa_v9CHQNQaFAmMl1FaKFbOlakgOLnTOyGC0NW_3_-g2Bolzp-c1DeMXaJGJvOf5ZQ8wy4x--LUCAbqx3IAFrYVtc?loadFrom=DocumentDeeplink&ts=2909.16)):

I mean, I look at survival rates in Northern European countries are up at 98% and it's because they're educated from a very young age to be checked and to screen themselves and to, you know, be aware. They understand what they're looking for and how to look for it. Yeah. We need to be more aware here. Absolutely. You know, our survival is good and it's getting better, but we need to be, we need to do more. We need to be Oh, absolutely. You just, we need to take it more seriously. Yeah. Well, Rachel, you look amazing. Thank you. Anyone that's listening, she does look amazing. Um, I wish you continued good health. Thank you very much. I think, you know, you're back in school and I can see the twinkle in your eye. <laugh> being back teaching I love, which is just fantastic. Yeah. Um, so I wish you the very best. Thank you for joining us today. Thanks for having me. Thank you for sharing your story, Rachel. I know every day is so precious with your family and that's why we are so appreciative of your involvement in our Metastatic Matters campaign kicking off this week.

Speaker 1 ([49:22](https://www.rev.com/transcript-editor/shared/8iHly6i7PkfGQbGmkvN796WfR5q6rOOpVp5tWeI9BKqWJ8ZoWBwCiM31Iayqe_rlGEJnkZRha5e1l7NxceOR3Fpftu8?loadFrom=DocumentDeeplink&ts=2962.62)):

The information in this podcast is based on the personal stories of those we have chatted to. If you are concerned in any way, please contact your GP immediately, or you can contact us@breastcancerireland.com.